PTO/SB/83 (05-03)
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

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Application Number	10/029,023
Filing Date	December 28, 2001
First Named Inventor	Michael J. Hopmeier
Art Unit	1743
Examiner Name	Latoya Cross
Attorney Docket Number	544322000200

To: P.	O. Box 14	ner for Patents 50 VA 22313-1450							
I hereby	apply to v	withdraw as attorney or	r agent for the	above identified	patent a	applica	ation.		
		nis request are: peing transferred	to another	attorney.					
This requ	uest is be	ing made at the requ	uest of the a	ssignee, Unco r	rventio	nal C	once	epts, Inc.	
1. T	he corresp	oondence address is N	OT affected b	y this withdrawal	•				
2. 🔲 C	hange the	correspondence addr	ess and direc	t all future corres	pondend	ce to:			
		COR	RESPONE	DENCE ADDR	ESS	••			
Cus	tomer Nur	mber							
		,							
OR									
X Firm	or idual Name	James Remenick (Powell Gold	stein LLP)					
Address	901 New Third Floo	York Avenue, NW							
City	Washing	jton	State	DC			Zip	20001-4413	
Country	USA								
Telephone	(202)347	-0066			Fax	(202	624	-7222	
X Thi	is request	is made on behalf of n	nyself and						
	all the atte	orneys/agents of recor	d,						
	the attorn	eys/agents (with regist	tration numbe	ers) listed on the a	ittached	paper	(s), or	r	
X	the attorn	eys/agents associated	with Custom	er Number	25	5227			
This requ	est is enc	osed in triplicate (incli	uding any atta	achments).		<u> </u>			
Name	1	C. Jaeschke, Jr. Re		· · · · · · · · · · · · · · · · · · ·				**	
Signature	W	4				-		-	
Date	Februa	ary, 2005							
NOTE: W the expira	ithdrawal is e tion date of a	effective when approved rath time period for response or	er than when rece possible extensio	eived. Unless there ar n period, the request t	e at least 3 o withdraw	30 days v is nom	betwee	en approval of withdra sapproved.	wal and

I hereby certify that this corr an envelope addressed to:	espondence is being deposited with the Commissioner for Patents, P.O Box 145	U.S. Postal Service with sufficient postage as First Class Mail, in 0, Alexandria, VA 22313-1450, on the date shown below.
Dated: February 1, 2005	Signature:	(Chimin Taylor)

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Art Unit	1743
Examiner Name	Latoya Cross
Attorney Docket Number	544322000200

To: P.	O. Box 14	ner for Paten I50 VA 22313-1							
I hereby	apply to v	withdraw as	attorney or a	gent for the	above identifie	ed patent	applic	ation.	
The reas	ons for th	nis request	are:						
Applica	tion is b	eing tran	sferred to	another a	attorney.				
This requ	est is be	ing made a	t the reque	st of the as	signee, Unc	onventi	onal (Conce	epts, Inc.
1. TI	ne corresp	ondence ad	dress is NO	T affected by	this withdraw	val.			
2. C	hange the	correspond	ence addres	s and direct	all future corre	esponder	nce to:		
		:	CORR	ESPOND	ENCE ADD	RESS			
Cust	tomer Nun	nher				<u> </u>		₹	
	ionioi itali		L						·
OR								·	
X Firm	or dual Name	James Re	menick (Po	well Golds	tein LLP)				
Address	901 New Third Floo	York Aver	ue, NW			 			
City	Washing	iton		State	DC		•	Zip	20001-4413
Country	USA								
Telephone	(202)347-	·0066				Fax	(202	2) 624	-7222
X Thi	s request i	is made on t	ehalf of mys	self and					
	all the atto	omeys/agent	s of record,						
	the attorn	eys/agents (with registrat	tion numbers	s) listed on the	attached	d pape	r(s), or	•
X the attorneys/agents associated with Customer Number 25227									
This reque	st is enc	osed in tripli	cate (includi	ng any attac	hments).				
Name	T	C. Jaeschk				-			
Signature	W	<						*	
Date		, 2005							
NOTE: Wi the expirati	thdrawal is e ion date of a	ffective when ap time period for I	pproved rather the esponse or pos	nan when receiv sible extension p	red. Unless there period, the reques	are at least at to withdra	30 days w is nom	betwee nally dis	n approval of withdrawal and approved.

I hereby certify that this corr	espandence is being denot	vited with the LLS. Postel Condec with sufficient and as 5 - 4 Clare M. II.
an envelope addressed to:	Commissioner for Patents,	P.O Box 1450, Alexandria, VA 22313-1450, on the date shown below.
Dated: February 1, 2005	Signature:	(Chimin Taylor)

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Art Unit	1743
Examiner Name	Latoya Cross
Attorney Docket Number	544322000200

Commissioner for Patents To: P.O. Box 1450 Alexandria, VA 22313-1450 I hereby apply to withdraw as attorney or agent for the above identified patent application. The reasons for this request are: Application is being transferred to another attorney. This request is being made at the request of the assignee, Unconventional Concepts, Inc. The correspondence address is NOT affected by this withdrawal. Change the correspondence address and direct all future correspondence to: CORRESPONDENCE ADDRESS **Customer Number OR** Firm or James Remenick (Powell Goldstein LLP) Individual Name 901 New York Avenue, NW Address Third Floor City Washington DC 20001-4413 State USA Country Telephone (202)347-0066 (202) 624-7222 This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number 25227 This request is enclosed in triplicate (including any attachments). Wayne C. Jaeschke, Jr. Registration No. 38,503 Name Signature Februar 2005 Date NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this corre an envelope addressed to: (espondence is being deposit Commissioner for Patents, P	ed with the U.S. Postal Service with sufficient postage as First Class Mail, in Box 1450, Alexandria, VA 22313-1450, on the date shown below.
Dated: February 1, 2005	Signature:	(Chimin Taylor)